

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**Laura Keeley**  
**Everytown Law**  
**450 Lexington Avenue, P.O. Box #4184**  
**New York, NY 10163**  
**2:22-cv-00059-AM-VRG DOC[8]**



9590 9402 7042 1225 9343 40

2. Article Number (Transfer from service label)

7021 1970 0001 7402 0988

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

delivery address different from item 1? ☐ Yes  
YES, enter delivery address below: ☐ No**FILED****CLERK, U.S. DISTRICT COURT**  
**WESTERN DISTRICT OF TEXAS**

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery  
(over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted  
Delivery☐ Signature Confirmation™☐ Signature Confirmation  
Restricted Delivery

Domestic Return Receipt